24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
ONE NATION PAC	
	C C00468447
Check if X 24-hour report 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Eusatrix Corporation	M M / D D / Y Y Y Y
Mailing Address P.O. Box 2543	11 19 2014 Amount
City State Zip Code	1500.00
Palm Springs CA 92263	Transaction ID : SE.8013 Date of Disbursement or Obligation
Purpose of Expenditure Voter Communications Category/ Type	11 19 2014
Name of Federal Candidate Support Office	e Sought: House District:00
MARY L LANDRIEU Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2750.00 2014	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Offic	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	1500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) SUBTUTAL OF OTHER INDEPENDENT EXPENDITURES	
(c) TOTAL Independent Expenditures	1500.00
Under penalty of perjury I certify that the independent expenditures reported herein were not mwith, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Patrick Krason	M / D D / Y Y Y Y
Signature [Electronically Filed] Date	20 2014